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FISKE FUND PRIZE DISSERTATIONS OF THE RHODE ISLAND MEDICAL SOCIETY.—NO. I.

BY THOMAS H. WEBB, M.D., PROVIDENCE.

"*What are the causes and nature of* RHEUMATISM, *and the best mode of treatment to be employed therein?*"

(Concluded from page 139.)

THE case which was given in the last number of the Journal was dwelt upon, on account of the obstinacy of its character, and the peculiarity of the effects produced by the opium; differing so materially from what we should have anticipated, knowing the generally received opinion respecting this drug. It has been compressed into as narrow limits as possible, though more detailed minutes of this and other cases have been kept; *sed ex uno, disce omnes.* For the last five or six years the plan has been pursued by us in two institutions with which we have been connected,* also in private practice; and likewise pretty extensively, by some of our medical friends; and thus far, with a degree of success that has not crowned our efforts when other means were exclusively confided in. Some of these cases were of long standing; one, in particular, of *twelve* years.

As regards the modus operandi of opium, we consider its action is to tranquillize and equalize the circulation and excitability of the system, and thereby facilitate the insensible perspiration that goes on during health, or the general diaphoresis which it generally induces and which brings the disease to a crisis. We know that a profuse perspiration sometimes comes on in rheumatism, and proves very troublesome, not assuaging pain, nor alleviating other uncomfortable symptoms; but we also know, that there is an effort, on the part of Nature, to overcome this morbid tendency, and substitute a critical sweat in its stead; and experience teaches us, that, whatever agents will prove auxiliary to this effort, are safe and salutary. For this purpose, we know of no one article which is preferable to opium, judiciously managed.

We are aware that Sydenham raised objections against this medicine; but he, of course, objected to it on account of the *manner* in which it was administered, and the effects in consequence, resulting therefrom. We also should join in such an opposition; believing that the principle, upon which the practice was based, was an erroneous one. The force of his objections, when duly examined, will be found to weigh against the *former mode of administering it*, and not against the *article itself.*

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* The Dexter Asylum and Providence Dispensary.

Heberden, whose authority needs no endorser to make it negotiable, observes, "Opium, notwithstanding Sydenham's objections, has at least proved a safe and effectual remedy"—"it has not only palliated symptoms, but has been judged to contribute to the cure of rheumatism."

Powerful prejudices exist in the minds of most individuals against it, grounded, as is supposed, upon the results of experience. Its stimulating and heating qualities, we are told, will augment, instead of lessen, suffering, and increase, instead of diminish, inflammatory action. This, we are free to acknowledge, is true, so long as we are governed by the old principle in administering it; viewing it simply as an *anodyne;* giving it in a *small dose*, and abridging even *that* if any uneasiness of head or stomach, any addition to febrile excitement, seems to be induced. But employed in the manner that Cazenave has designated, it in fact becomes an *entirely different medical agent*, and is characterized by *strongly marked* sanative virtues. When thus used, it does indeed establish the correctness of the appellation long ago bestowed upon it, and becomes in truth "*a gift of the Gods.*"

There are some cases to be met with, wherein the medicine will not produce its effects, unless by the aid of an adjuvant. As, for instance, where the stomach is in such a state of debility that there is not sufficient energy remaining to enable it to act upon the opium; here, of course, we must fail unless so fortunate as to detect the derangement and resort to suitable measures for removing it. We advise, in such cases, the combining of a certain portion of sulphate of quinine, with the opium, varying the quantity to suit the exigencies of the case, and the frequency of the dose. We shall thus be enabled to restore or improve the tone of the organ, and thereby accomplish the main object had in view.

Sometimes we may fail in consequence of an idiosyncrasy of the constitution. One of the few failures that have occurred here, is to be thus accounted for. The patient, a young female, had suffered severely from a rheumatic affection of the knee joints; it had resisted all ordinary modes of treatment, and was finally subjected to the opium plan, but with only partial relief. The patient perspired freely, nay, profusely all over the body, but the lower extremities remained hot and dry. After persevering in the course for several days, the mother observed, one morning, that there was one curious circumstance about her daughter which she had forgotten to mention. It was, that in all sickness where sweating had been necessary, it was found impossible to produce it upon the lower limbs.

Although we have had cases cured without pushing the pills to the sweating point, still if relief is not previously obtained, and as a general rule it will not be, they must be continued to that point; and where we cannot attain it, we shall not be disappointed if our efforts at a cure are foiled.

LOCAL APPLICATIONS.—We make but little use of these in the majority of cases. Looking upon the disease as an affection of the system in general, we direct our treatment to the system. Those which we most frequently employ are blisters, camphorated oil and camphorated turpentine; using ℨij. of camphor to the ounce of the other ingredient. We also sometimes employ moderately warm evaporating lotions. Where the parts are hot, or easily increased by heat, we advise cold fomentations; where cold, or easily affected by cold, warm or even hot ones. This distinction with regard to the different sensations experienced, which we first saw mentioned upon the authority of Dr. Elliotson (who as a correct and judicious practitioner ranks deservedly high), is one well worthy of being borne in remembrance, as it often exerts a controlling influence, for evil or for good, over our therapeutic measures.

DIET AND REGIMEN.—Upon these we refrain from dwelling, inasmuch as our remarks are for professional and not popular use; and it is to be presumed that every physician knows, and impresses upon his patient, the importance of strictly attending to these two essential particulars; and indeed the utter impossibility of any mode of practice proving safe and successful, without extreme caution as regards undue exposure to variableness of temperature, and perfect temperance, and in many cases rigid abstemiousness, both as respects eating and drinking.

In conclusion, we would observe, that we are far from being willing to place *unlimited dependence* upon the powers of opium administered in the manner here described; much less willing are we to consider it in the light of a *specific*—a class of articles, in the existence and efficacy of which, with perhaps a very few exceptions, we have little faith. Although, judging from what we see day after day blazoned forth, in the public prints that are issued and circulated wherever civilized man has gained a firm footing, and we blush to say it, often, too often, under the sanction and even professed countenance of some of our own brethren, whose good sense cannot but give the lie to the statements, at the very time they are drawing them up, promulgating, or uttering them; we repeat it, although from the frequency of this most abominable of all species of quackery, one unacquainted with the innumerable difficulties that not unfrequently beset us, in the management of apparently the simplest case which can occur, would very innocently conclude that nothing was more easily to be procured than a certain and unerring remedy for every disease that flesh is heir to; and that the victim of death can be as easily rescued from his awful and impending fate, the ravages of wide-spreading pestilence as promptly checked, and the most excruciating agonies as surely alleviated, as craving hunger can be appeased, or parching thirst assuaged.

Neither opium nor any other medicine can prove an infallible remedy, from the very nature of disease. There are so many incidental circumstances, any one of which may materially alter the appearance or modify the character of cases, that it is impossible, without the most flagrant dereliction from the responsible charge entrusted to us, blindly to depend, at all hazards, exclusively, upon the virtues of any separate preparation.

But under the guidance of a correct judgment, aided by sound discretion, and a corresponding discrimination, we sincerely believe that Cazenave's plan will occasion as little disappointment as can reasonably be expected from any means emanating from a mortal source, and not endowed with the attribute of infallibility.

ON THE MEANS OF ELEVATING THE MEDICAL PROFESSION.

BY SILAS HOLMES, M.D.

[Communicated for the Boston Medical and Surgical Journal.]

It must be evident, I think, to the most inaccurate observer, that the medical profession does not hold, in the estimation of the world, that relative rank to which it is entitled. Its importance is perhaps sufficiently appreciated ; for however men may scoff at and scorn it in the pride of youth and health and strength, yet in the hour of need and danger all have felt and owned its power, either in alleviating the pain almost inseparable from disease, or in restoring to ease and safety, the body lately racked with suffering. And even when that terrific change has come, which comes to all, and which no skill nor science can finally avert, surviving friends have been compelled to own that the inefficiency of art is not so much displayed, as is the superior power of that Almighty Being in whose hands are the lives of all his creatures. Nor is it because the study or the practice of the medical art is not in itself dignified and noble. What branch of science can be more interesting, what more worthy of the profoundest study, what more intimately connected with the happiness of men, than that which treats of the structure and the functions of the human body ? The only secular employment on which the Son of Man adventured during his residence on earth, was the healing of the sick ; as though the extent of his power and the divinity of his mission could in no other way be so strongly attested.

Still it cannot be doubted that the medical profession, as a profession, does not hold that station in society to which it is entitled ; it is, and long has been, in this country at least, known as the " ultima ratio," the last resort of those who would be ranked among professional men, but who have not the intellect, the education or the means, which are requisite for admission to the church or to the bar. Many of its members are deservedly celebrated for the science, skill and genius they are known to possess ; many of them stand among the most learned of our land ; but the general rule is hardly invalidated. In the cities of Boston and Philadelphia, physicians stand as they should ; and in these two cities they need not fear the strictest comparison with any of their brethren of the other professions. Medical men are now in my mind's eye, who are as guiltless of any sort of learning as the babes who are sometimes ushered by them into existence ; who read nothing, either of medicine or anything else ; but who still persist in practising by rote, firing away at random in the hope of bringing down the disease, though unfortunately they sometimes bear wide of the mark, and not unfrequently bring down the patient. True it is that this class of practitioners is out of date, and passing fast away; but many of their successors are very little better, hardly calculated to keep up the character of medicine as a learned and dignified profession. Evidently, then, it behoves the professors of this art to take some speedy and effectual means to elevate the character, and add to the influence of those who from every quarter are crowding into their ranks.

But here let me not be misunderstood. The province of the physician is necessarily limited: the circle in which he moves must forever remain comparatively contracted. The professors of divinity and law are obliged, from the character of their respective studies, to be always before the public; and upon the appearance made by them before that public, their reputation and the means of their support in a great measure must depend. The business of the physician lies in a very different sphere; his proper scene of action is not the forum or the pulpit, but at the bedside and in the sick room; and though the display of his skill and science be not so splendid, though it may not gain for him the loud applause of listening thousands, yet is its influence infinitely more desirable in the circle where it may be felt, and it gains for its possessor the love and confidence of all who are within that circle. The medical man, however, has another character to sustain; and upon this character mainly depends the standing of the faculty. I mean his intellectual character, apart, if I may so express it, from his medical. And in this is the general defect of medical men altogether most apparent. For true it is that the grave sometimes hides their purely *professional* errors; but there is no such concealment for their *general* blunders; it is the want of intellectual culture which exposes them to ridicule, and the profession to contempt.

The first step, then, to be taken to elevate the character of the medical profession, must be, *to raise the standard of general education among those who are entering its ranks.* An university education ought in all instances to be preferred. Not that an equal amount of knowledge may not be procured without passing through any such institution; doubtless at some of our academies, the means of instruction are quite as good as at many of our colleges. Still this is not generally the fact; and as a general rule it is doubtless true that the man who has been liberally educated, as it is termed, is infinitely better fitted to pass through his professional career with honor to himself, safety to his patients and credit to his profession, than one who has received no such public course of instruction. I am far from believing that all who can tack to their names an A.B. or an A.M. are necessarily learned; unfortunately for the credit of our literary institutions, every day's experience teaches us that such is not the fact. The young man who loiters through four years in college, neglecting every duty which he can possibly avoid, and relying on his classmates for assistance in his literary troubles, as the manner of some is, will of course come out very nearly as he went in, so far as all useful knowledge is concerned, though it would hardly be possible, even for such an one, to avoid picking up a few fragments here and there, which at the very least might save his credit in after life. When the great majority of the medical fraternity is as well educated as the great majority of priests and lawyers in our country, then, and not till then, will the profession stand as high.

I am well aware that Hunter, and Pott, and Jenner, and Harvey, and many other of the brightest names in medical literature, were, comparatively speaking, uneducated men. I well know that neither these, nor many others of almost equal eminence, were either Cantabs or Oxonians. But it cannot be doubted that had they been so, their works would have been very much more interesting, not to the physician merely, but to the whole literary world. Could Hunter have had the opportunities of Dr. Paris, could he have exchanged the harsh, involved and miserable style in which he wrote, for the simple and elegant periods of his less original but more polished successor, how much greater and more immediate would have been the influence exerted by his works. Let any person compare the circulation of Hunter on the Blood, with that of the Pharmacologia of Dr. Paris, and he will see how far the sale and influence of each has been affected by its peculiar style. Who can say how far the works of Good, and Armstrong, and Richerand, and Cullen, owe their circulation to their style. True it is that some of the individuals last named had never received the benefit of a public education; but it is also true that by their own exertions they had raised themselves very much above the common level. And this leads me to remark, that if the competent amount of general knowledge is possessed by the individual, *no matter where he obtained it.* As has been already remarked, there is no magic in the walls of a college to imbue with learning, *nolens volens*, all within them; though for many reasons, which I need not mention here, the college education is always to be preferred.

What are the branches, then, with which the medical student should in all cases be acquainted? He should be well versed in ancient languages. With Greek and Latin he should be perfectly familiar; and that, not simply because they form an indispensable part of general education, but because they are especially essential to the medical man. Many of the ablest, and all of the oldest works upon our science, are written in one or the other of them. Most of the technical terms employed in it are derived from the Latin language; so much so, that without a competent knowledge of it, it is impossible fully to comprehend many of those works which are essential to a purely *medical* education. Without considerable knowledge of these languages, then, the medical man will fall below the standard of professional dignity; and so of other branches of science. Besides, it ought to be remembered, that the community can form no correct judgment as to the comparative merits of physicians. They therefore, necessarily, where they reason at all, reason analogically: when they find a medical man well informed on other subjects, and capable of reasoning correctly on these subjects, they are apt to conclude that he is also well informed on medicine, and is capable of forming a correct judgment as to the nature and treatment of disease; and in the great majority of instances this conclusion will be a correct one.

I remark, therefore, in concluding this part of my observations, that every medical student should be obliged to possess, as far as may be, a knowledge of all the branches of a liberal education, equal in amount to that usually acquired in college. In addition to all this, it cannot be denied that the pursuit of general literature, in early life, gives to the mind and manners a polish which can be acquired in hardly any other way. Many an individual has come within my knowledge who could not have been more completely puzzled were he directed to find the longitude, than if he were called upon to construe and parse the Latin of that medical degree on which he mightily prided himself. Let all our medical schools, then, follow the example of the medical department of Harvard University, and require either an academical degree, or evidence of the possession of a competent amount of general education. When this takes place, and not till then, will the medical character cease to be the constant theme for the contempt, ridicule and satire of the rest of the world. As has been before remarked, thousands are flocking into medicine, because they cannot be admitted into divinity or law; the profession is overstocked, not with intelligent and well educated men, though I rejoice in the belief that there are many of these, but with illiterate and ungentlemanly men, who disgrace and degrade the profession they pursue. Shut up the avenues; make the entrance into the profession more difficult, by restricting its privileges and its honors to those who have shown themselves worthy to receive them; and though the number of physicians might be diminished, still quite as many would remain as the wants of the community require. The interests of medical science would be advanced, the weight of medical character would be increased, the influence of quackery would be diminished, the profession would be gainers, the community would be gainers.

(To be continued.)

CASE OF THE EVACUATION OF A PORTION OF SMALL INTESTINE.

BY CHARLES HOOKER, M.D., OF NEW HAVEN, CONNECTICUT.

[Communicated for the Boston Medical and Surgical Journal.]

A BOY, 14 years of age, was sick with typhus fever about three weeks. His symptoms were such as attended most other cases of this disease that season—the summer of 1831. In most of the cases there was *tympanites intestinalis* accompanied with copious *hemorrhage from the bowels.* These symptoms were most successfully treated with the nitras argenti, administered in pills in doses of one eighth of a grain every hour, or every two or three hours. The invariable effects of this medicine were copious eructations and dejections of flatus, with a subsidence of the abdominal tumefaction, and a cessation of the hemorrhage. These symptoms, in this case, occurred the latter part of the second week. The silver pill was given every two hours with the usual effects. On the fourteenth day of the fever a portion of intestine was evacuated, with a quantity of bloody fæcal matter. It was the whole of a portion of small intestine, ten inches in length, even with parts of the mesentery and some mesenteric glands attached.

Probably an introsusception had taken place, and after the occurrence of adhesion the introverted portion of intestine sloughed off. It is remarkable that there was apparently in this case no obstruction in the bowels, there being at least one alvine evacuation every day of the disease, and but little vomiting. The patient convalesced, and soon regained perfect health.

M. MAGENDIE ON THE NERVES OF THE FACE.

[From M. Magendie's course of lectures on the Physiology of the Nervous System, delivered in 1836 in the College of France, the following extract, on an interesting branch of the subject, is selected.]

The first problem which we propose examining by the experimental method, is the following:—"Investigate the phenomenon of sensibility in the nervous system." For this purpose we shall select the nerves of the face; and first let us say a few words touching the anatomical disposition of the nervous system in this part.

It is unnecessary for me to mention, at any length, that the human face is endowed with a very high degree of sensibility; it is moreover the seat of several of the special senses; but let us examine, under the influence of what nervous branches this exquisite sensibility is acquired.

The integuments of the face are chiefly supplied by two cerebral nerves; one is the facial nerve, properly so called (the portio dura of the 7th pair); the other is the fifth nerve, or, more correctly speaking, certain branches of the fifth.

The facial nerve, or portio dura of the 7th pair, arises near the bottom of the fourth ventricle, appears externally between the restiform and olivary bodies, and, having traversed the temporal bone, emerges through the stylo-mastoid foramen, to distribute itself to the integuments of the face and head, and several of their muscles.

The fifth, or trigeminal nerve, is more complicated. It arises by numerous filaments from the neighborhood of the fourth ventricle, the olivary and restiform bodies; it then advances forwards, and having formed a very remarkable ganglion (the *casserian*) near the cavernous sinus (where the nervous substance, as I before told you, is bathed in the cerebro-spinal fluid), from thence three large branches are given off to the orbit and its various parts, the integuments of the forehead, the jaws, and integuments covering the interior portion, and, finally, the teeth, and part of the tongue.

I can only mention, in the most general way, the anatomy of parts which may become the subject of our study. However, as this part of the question is most peculiarly interesting, I shall show you at our next meeting a preparation in which the nerves of the fifth pair, and the facial nerve, have been carefully prepared; you will see that one is much more voluminous than the other; that the fifth nerve is much more complex in its structure, arrangement, and distribution, than the seventh nerve; it arises more deeply in the nervous centres, and, above all, is distinguished from it by the existence of the ganglions so often alluded to.

The branches of the fifth nerve are extremely numerous; hence, from the very brief enumeration we have already given, you may judge of the very great variety of parts which it supplies; indeed, this nerve alone has formed the subject of several distinct treatises, in folio, quarto, &c. Sœmmering and Meckel were the first who followed with great care all the small filaments of the trifacial nerve, yet neither anatomist drew any useful conclusions from his researches. An experiment made by Sir Charles Bell demonstrated that the motion of closing the eyelids is destroyed by the section of the facial nerve. I have frequently repeated this experiment, and found it perfectly exact. As soon as you divide the trunk of the facial nerve in an animal, the latter loses the power of closing its eyelids, the eye-ball remains constantly exposed to the action of the air, the animal no longer winks, either spontaneously or when a foreign body is brought into contact with the conjunctiva. Thus you see experimental physiology demonstrating a fact which could never have been discovered by the mere anatomist, and establishing a line of demarcation between nerves with respect to their sensibility. We shall examine this fact on the living animal before you, and show you the difference existing between the sensibility of the facial nerve, and that of the fifth, in the most striking manner.

[Here the Professor took a young rabbit, and made an incision into the skin, over the course of the facial nerve, observing that it was very easy to be found in these animals, as the divided parts furnished so little blood.]

Here (said the Professor) is the trunk of the seventh pair; you see how easy it was to lay it bare. Before I proceed to cut it, let me draw your attention to the fact, that the integuments of the animal's face are highly sensible, and particularly in the parts to which the branches of the seventh pair are distributed. Now, by pinching or cutting the nerve we can determine directly whether it is really endowed with sensibility or not. You see how I pinch and irritate the nerve without developing any very great signs of suffering; in fact its sensibility seems almost null. Here, then, we have a nerve taking its origin in the brain, and distributed to the face; yet is evidently not the agent of sensibility. Pay attention to this fact, Gentlemen, it is one of the first I have had the honor of showing you, and may well contrast with the conjectures of our more brilliant, but unsolid physiologists.

We have said that the face was principally supplied by two nerves; we have shown that one of these nerves is little, if at all, sensible; hence a natural conclusion, that the other, or nerve of the fifth pair, is the one destined to supply the parts with sensibility. This reasoning, however just and logical it may appear, is not sufficient; we have more conclusive evidence, and must produce it; experiment must determine the question for this nerve, as it did for the facial one. Sir C. Bell performed this experiment, and divided the branches of the fifth nerve, as they pass out from the supra-orbital and sub-orbital foramina, and from the sub-mentar hole. We thought it right to modify this experiment, and instead of operating the section of the nervous branches not far from their termination in the integuments of the face, we endeavored to make an experiment more perfect, and less subject to the influence of any disturbing causes, by dividing the trunk of the nerve within the cavity of the skull, just as it leaves the pons varolii. By operating in this manner we shall obtain general results more exact and free from error than Sir C. Bell could have obtained by the division of a single branch.

It is not a matter of very great difficulty to divide the trunk of the fifth pair of nerves in a living animal. If you are well acquainted with its traject in the particular species of animal on which you propose operating, you can introduce a triangular-shaped, cutting instrument into the middle temporal fossa, just over the trunk, which you cut across by simply depressing the instrument near the place where the nerve separates itself from the brain. I should, however, direct your attention to the fact, that the fifth nerve runs close upon some of the venous sinuses, and if you introduce the instrument in such a way as to wound one of these venous recevoirs, or, perhaps, the trunk of the internal carotid artery, your experiment must naturally fail. Hence you see, that though our method of practising the experiment has the advantage of being followed by more certain and general results, it is much more difficult than that of Sir C. Bell. You know whether you have divided the nerve or not, by the movement, in totality, of the animal's body the moment you cut the nerve.

[Here M. Magendie introduced a sharp-pointed, cutting instrument into the cranium of a rabbit, and probably divided the nerve at the first attempt, for the animal gave signs of acute suffering, by a general muscular effort, when the handle of the instrument was elevated.]

If (resumed the Professor) the animal retain any sensibility on the side of the face corresponding with the nerve now divided, you may conclude, to a certainty, that the section has been incomplete. However, let us see. [The trial was here made.] The experiment, Gentlemen, has been perfectly successful. I touch and pinch, as you may observe, various parts of the animal's face, the nose, the lips, the surface of the eye-ball, &c., and the animal does not evince the slightest trace of sensibility. Hence the physiological conclusion to be drawn from the section of the fifth nerve, which I have performed before you, is, that this nerve presides over the function of sensibility in the face. When this has been demonstrated in so direct a manner, we have no necessity to recur to induction. However, I may mention that experiments made with galvanism on the nervous system tend also to show, that the insensibility of the parts of the face in man depends on a lesion of the fifth pair of nerves; hence, during hospital, or private, practice, whenever you observe any particular portion of the face, the conjunctiva, for example, to be insensible, you will know to what particular nervous branch your remedies should be directed. Should the seventh nerve be the one injured, the face still preserves its sensibility.

I shall conclude by again impressing on your minds that the facial nerve is not the regulator of sensibility in the face, but that that function is supplied, *par excellence*, by the fifth.

OF PERSONS POISONED BY EATING PHEASANTS, OR PARTRIDGES.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Noticing the queries of Dr. Hayward, upon the subject of persons having been poisoned by eating the *Tetrao Umbellus*, brought to my mind a relation which was given me in Philadelphia, by two physicians, upon the subject. One of these physicians was the person poisoned, and the patient of the other, the latter of whom was the present distinguished Professor of Theory and Practice in the University of Pennsylvania, DR. CHAPMAN.

The symptoms were represented as most alarming and death-denoting. The stomach was rendered so torpid by the effect of the poison, that the most powerful emetics failed to excite it, and death seemed at hand. In this situation resort was had to an injection, containing a *whole drachm* of tartar emetic. It produced a most violent cholera morbus, and the patient was saved.

The poisonous quality of the flesh of the pheasant, or partridge, is supposed to be induced by its feeding in winter upon the buds, fruit, or leaves, or all of them, of the *Kalmia latifolia*. Both this bird and the deer eat of these articles with impunity to themselves, whilst death has sometimes occurred from the human species having partaken of the bird. It is possible that not only this species of laurel is eaten by these birds, but that the *Kalmia augustifolia*, or *lambkill*, which is known to be very fatal to sheep, is occasionally partaken of by them.

It is worthy of very particular remark, that in the case alluded to, both the wife and daughter of the gentleman in Philadelphia ate dinner with him, and partook of the same bird, with entire immunity from any ill effects whatever. This was accounted for by the doctor's observing that he selected the *black meat* of the pheasant, whilst his wife and daughter partook of the breast and wings only.

The reason that the *black meat* is most poisonous, will at once be obvious, when we call to mind that it is the part which lies in contact with, or most contiguous to, the intestines, and thus receives a direct impregnation of their deleterious contents ; whilst, from the shortness of the time that the bird feeds upon the poisonous vegetable, the parts more distant, and less furnished with blood, as is the *white meat*, do not become contaminated. It is only in winter, or the wintry part of spring, that we have ever heard of instances of persons having been poisoned in this way. The *kalmia* is not the favorite food of the bird, and it probably only resorts to it when the scarcity of other food compels, and only for a short time.

As to birds being sent to market, or eaten, which have been *found* dead, we never heard of an authenticated instance.

Although we have learned that a tincture, or infusion, of the leaves of this shrub, has been used in small doses in diarrhœa, with advantage, still it is well known to be poisonous to man and to horses. It is said that the Indians made use of a decoction of it to destroy themselves. A decoction of the leaves, we formerly used as a lotion for *psora*, which is the only way that we have ever used it at all. We have not learned, or do not now recollect, that the particular nature of the poison has been demonstrated by any accurate analysis, although it is pretty well ascertained that the leaves contain resin. We have supposed that its active principle depended upon the same substance as the other species of laurel, this being the *American laurel.* Yours truly,

Lebanon, April 3d, 1837. JOSEPH COMSTOCK.

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BOSTON, APRIL 12, 1837.

GROWTH AND IRREGULARITIES OF CHILDREN'S TEETH.*

A WORK has just been received here, from Paris, which deserves an immediate republication in this country. It is expressly devoted to the consideration of a subject which physicians and surgeons, if not dentists, seem to have very much neglected, viz. the growth and irregularities of the teeth of children. Foreigners consider it a peculiarity in the United States, that the people, with a few exceptions, have defective teeth—and in the Northern States, their early decay is a matter of notoriety. Now it has never been discovered that there is anything in the condition of the climate to produce this result—nor has it been ascertained, satisfactorily, that the common mode of preparing food exerts a destructive influence on the dental apparatus. That individuals, however, may hasten the early decay of the teeth by habitually taking hot food, hot drinks, and the like, cannot be denied.

The foundation of all the misfortunes attending the development and subsequent history of the second set of teeth, seems very much to depend upon the condition and treatment which was bestowed upon the first. Since reading this valuable treatise, we have more than ever been convinced of the importance of preserving the milk teeth as long as possible. Habitual cleanliness, frequent use of the brush, and the introduction of gold foil into carious openings through the enamel, should in no case be neglected. Usually, the first teeth are regarded as being of so little consequence, that instead of making any provision for saving them, the least pain arising from caries is a signal for their extraction. The violence done to the jaw by this forcible operation, not only has a tendency to distort it, and change the character of the facial expression, but it also deranges the order, and paves the way for irregularities and disease in the new series. When left where they were designed to remain till the roots are taken away by the absorbents, the new teeth are undisturbed—and their gradual evolution is in conformity to a law of the animal economy, which carries with every individual organ of the body the principle of self-preservation.

The volume before us is naturally divided into several sections—the first treating of the milk teeth and the treatment of infants during dentition. Then follows a sensible dissertation on the second dentive, accompanied with judicious observations on the growth of the permanent teeth. Diagrams follow the text, illustrative of the anatomy of the mouth at different ages. Irregularities, diseases of the gums, and the application of tooth powders, follow ; and lastly, the volume closes by a well written chapter on the utility, necessity and mode of inserting artificial teeth—which is of such a plain, common sense character, as to carry its own recommendation to the conviction of the reader. Some of the author's remarks on toothache we shall here quote.

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* Observations on the Growth and Irregularities of Children's Teeth; followed by remarks and advice on the teeth in general: to which is added a short essay on the advantages of Artificial Teeth. By W. H. Mortimer, Surgeon Dentist to the British Embassy, etc. etc. Paris, 1836.

"In all cases of external toothache every effort should be made to spare the tooth : if the nerve is too exposed to allow the stopping with gold, the fusible metal should be tried, and, when the tooth is less sensible, have it taken out, and, if possible, stopped with gold. Should it be too far gone to allow it, then have it stopped every two years with fusible metal : a tooth will sometimes last for years in this manner. No stopping is completely effectual but gold ; but this is a very good substitute when that cannot be used. All other stoppings, whether metallic or otherwise, are of no use whatever.

Internal toothache cannot be remedied but by the extraction of the tooth. In these cases the pain is a gnawing, dumb sensation, and comes on always at night, when the patient goes to bed. The tooth will be found almost always loose. When extracted, a bulb will be generally found attached to the fang of the tooth ; from which it may be inferred that the patient will still suffer after the operation, as though the tooth was yet in the jaw, and will very often continue with unabated intensity, till the periodical attack of the next night approaches. It is easy to distinguish whether the patient will suffer by the pain not subsiding within a few minutes after the operation. When the pain continues, foot or hip-baths should be taken, and if not efficient in removing it, a narcotic should be given ; for the pain is insupportable.

One word on the operation of drawing teeth. We know it would be losing time to try to persuade our readers that they ought to look upon this operation, if not with indifference, at least with some little degree of reason. The actual pain of drawing a tooth is not so very great ; it is the nervous irritation that is excited before the operation, and the mental agitation that for days has been working upon the whole system, that renders the thoughts of the operation so alarming ; and which magnifies a pain, which, if felt unawares, would hardly cause an exclamation, into the most excruciating sufferings ; and when patients sit down to be operated upon, the fever and excitement are such that they sometimes hardly feel the operation. But there is no means of infusing a sufficient degree of courage into the minds of patients to decide them at once to undergo the operation, rather than suffer physically and morally so long. It is certain that, if the operation were independent of our will, and that it was nature and not art that removed the tooth, we should submit to it with little or no complaining ; for people wlll submit to the toothache for hours and days ; and yet the pain of extracting a tooth is not to be compared to one single attack of toothache ; for we repeat, if on the first approach of toothache, the patient went to a Dentist, he would, in seven external cases out of ten, be able to save the tooth ; but if it be delayed until the inflammation extends to the other teeth, it is then impossible to afford relief without extraction, and every hour's delay only adds fuel to the fire. Another species of toothache, that resembles very much a tic, is that which attacks females during pregnancy, and which often occurs without any of the teeth being decayed. Relief can seldom be obtained without the extraction of a tooth. We have attempted every antalgic treatment we could imagine, without success. We are obliged to recommend the patient not to continue suffering under the hopes of relief; above all, when any of the teeth are decayed.

The best mode of extracting teeth is, the manner each Dentist is most frequently in the habit of operating. The only advice we can give on this subject is to request the operator to warm the instrument, so that it shall not feel cold when applied to the teeth. This trifling precaution does away with a most unpleasant, and very often painful sensation, and makes the operation less disagreeable. The credit we have obtained for skilful operations we consider in a great measure owing to this trifling precaution.

We seldom or never lance the gums previous to operating, provided the crown or body of the teeth is sufficiently strong; it gives pain, retards the operation, and is of little or no benefit."

We shall endeavor, as we find room, to give further extracts from this work hereafter.

Stillingia Sylvatica in Scrofula and Tinea.—Dr. Wm. M. Lee, of Indiantown, S. C., recommends this article in the above complaints, in the last number of the Southern Medical Journal. In one successful case of scrofulous ulcers of the face, he prescribed 4 grs. pilul. hydr. every alternate night, and during the day three wineglassfuls of the decoction of stillingia, prepared by simmering a double handful of the recent root in four pints of water down to two. In the course of two months the ulcers healed and the health improved. In tinea it had proved equally successful, and was thought by Dr. L. to be far superior to sarsaparilla.

Sinapisms to the Breasts in Amenorrhœa.—This remedy, which has been highly extolled of late as a remedy in cases of suppressed catamenia, is not always successful. At a late meeting of the Augusta (Geo.) Medical Society, Dr. Dugas mentioned a case in which they were highly serviceable. They were prepared of equal parts of mustard and flour, made into a paste with water, and applied alternately to different places on each mamma, for three days. Dr. Antony said he had tried the same course in six or eight cases, and had met with but partial success in one case only. Several members had used, with some benefit, sinapisms to the upper and inner part of the thighs. Dr. J. A. Eve thought the use of sinapisms to the breasts was productive of mischief in some cases, such, for instance, as those in which there was no want of excitement in the uterus.

New Medical Room.—The room recently fitted up in Tremont street by the Boston Society for Medical Improvement, exhibits both good taste and convenience. It is worth the while to call in and examine the apartment. Understanding that the Association are making collections, we believe there is no place in the city where physicians could deposite anatomical preparations to be more serviceable or safe.

Geology of the State of New York.—Dr. Lewis C. Beck, to whom we beg to return our thanks, has furnished us with a series of the first reports made to the Governor by the scientific corps engaged in the very important service of making a geological survey of the empire State. From Dr. Beck's and Prof. Emmons's papers, we hope to be able to transcribe, hereafter, paragraphs at least, which will be appropriate for the pages of an exclusively medical publication.

Geology of the Public Lands in Maine.—Dr. Jackson's first report to the executive of Massachusetts, in an octavo pamphlet of forty-seven pages, has been distributed within a few days to the members of the Legislature, and appears to have fully met the expectations of that body. Geology seems to be the particular department in which this gentleman is eminently qualified to rise to an enviable distinction; it is therefore hoped that he will wholly abandon the practice of medicine, the daily details of which are utterly at variance with a pursuit in which he can always shine without borrowing light.

Lithotripsy.—At a meeting of the Royal Academy of Medicine, in Paris, M. Segalas introduced a child three years of age, on whom, when yet two years and nine months old, he performed the operation of lithotricy. The entire time of cure was six weeks; in which period the instrument had been introduced and used six times.

This is probably the youngest subject yet operated upon in this manner, and will form an exception to the prevailing rule, that neither lithotricy nor lithotripsy can be performed at so tender an age.

Apropos, Dr. Gibson informs us, that all the cases mentioned in his communication to the American Journal of the Medical Sciences for August, 1836, as having been operated on by him, are entirely cured.

Mr. Liston, in his Elements of Surgery, a copy of which we have just received, and shall put to press, for insertion in the Library, expresses himself as not very sanguine in supposing that the breaking up of the stone in the bladder will ever supersede lithotomy. At the same time he admits that this operation is very advisable in certain cases, and may be resorted to with every prospect of a safe, speedy and successful conclusion.—*Eclectic Journal of Med.*

Properties of Caoutchouc as an external irritant.—Dr. Chase, in a paper recently read before the Philadelphia Medical Society, extols the efficacy of sheet caoutchouc as an application for the relief of chronic local pains, gout, rheumatism, &c. He employs the sheet caoutchouc, which is applied to the painful part and secured with a common roller bandage, or adhesive strips. In a few days considerable redness of the skin is produced, followed by a vesicular eruption, the vesicles of which vary from the size of a pin's head to that of a small pea. Further experiments should be made with this article.—*American Med. Jour.*

Anomalous Menstruation.—M. Bourgeois has met with a curious example of this. A young lady of 15 or 16 years of age, commenced some time since to menstruate from the extremities of each of her ten fingers. At the second menstrual epoch, the hæmorrhage was renewed from the same place, and at the period when M. B. communicated the fact to the Med. Society of Paris, the menses had not appeared in the natural manner.

Whole number of deaths in Boston, for the week ending April 8, 39. Males, 19—Females, 20.

Consumption, 7—debility, 1—dropsy, 2—fever and ague, 1—child bed, 2—scarlet fever, 2—lung fever, 4—typhus fever, 3—infantile, 6—liver complaint, 1—fits, 1—dropsy on the brain, 2—teething, 2—delirium tremens, 1—erysipelas, 1—old age, 1—stillborn, 1.

TO MEDICAL STUDENTS.

The undersigned are associated for the purpose of instructing in all the branches of Medicine and Surgery. A suitable room will be provided, and pupils will have the use of an extensive medical library, opportunities for seeing the practice of one of the districts of the Dispensary and of the Eye and Ear Infirmary, and of attending a course of lectures on the diseases of the eye.

A regular course of recitations and examinations will include all the required professional works.

Anatomical instruction and private dissection will form a prominent part in the study of the pupils.

For further information, apply to either of the subscribers.

JOHN JEFFRIES, M.D.
R. W. HOOPER, M.D.
JOHN H. DIX, M.D.

Franklin Street, Nov. 9, 1836. N16—tf

TO MEDICAL STUDENTS.

H. A. DEWAR, M.D. intends forming a class for the study of Dentistry, in every branch. The number will be limited, and each student will have an opportunity of becoming practically acquainted with all the operations and manipulations requisite. Dr. D. has provided a large and commodious work-room for their exclusive use. Further particulars may be learned by calling on Dr. Dewar, No. 1 Montgomery Place. tf—Oct. 19

Boston, Oct. 7, 1836.

RETREAT FOR INVALIDS.

The profession is respectfully informed that Dr. A. H. Wilder has purchased a large and convenient house in the pleasant town of Groton, Mass., likewise suitable carriages, horses, saddles, &c., for the accommodation of nervous invalids. April 12—3t

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A BARGAIN.

A PHYSICIAN in the County of Kennebeck (Maine), wishing to leave the State, would dispose of his situation on the most reasonable terms. It is an eligible stand for business, and offers a rare opportunity for any young gentleman wishing to engage in the practice of medicine. For further information, inquire at this office—if by letter, post paid.

Feb. 1. tf

MEDICAL INSTRUCTION.

The Subscribers have associated for the purpose of giving instruction to Medical Students. Opportunities will be afforded for the observation of diseases and their treatment in one of the Dispensary Districts and at the House of Industry; and clinical instruction will be given on the cases. Weekly Lectures and Recitations will be given on the various branches of Medical Science, and ample opportunities afforded for the cultivation of Practical Anatomy. Special attention will be paid to the exploration of diseases of the Heart and Lungs.

Applications may be made to either of the Subscribers.

MARSHALL S. PERRY, M.D.
AUGUSTUS A. GOULD, M.D.
HENRY I. BOWDITCH, M.D.
HENRY G. WILEY, M.D.

Nov. 30.

PROLAPSUS UTERI CURED BY EXTERNAL APPLICATION.

DR. A. G. HULL'S UTERO-ABDOMINAL SUPPORTER is offered to those afflicted with *Prolapsus Uteri*, and other diseases depending upon relaxation of the abdominal muscles, as an instrument in every way calculated for relief and permanent restoration to health. When this instrument is carefully and properly fitted to the form of the patient, it invariably affords the most immediate immunity, from the distressing "dragging and bearing down" sensations which accompany nearly all visceral displacements of the abdomen, and its skilful application is always followed by an early confession of radical relief from the patient herself. The Supporter is of simple construction, and can be applied by the patient without further aid. Within the last two years 700 of the Utero-Abdominal Supporters have been applied with the most happy results.

The very great success which this instrument has met, warrants the assertion, that its examination by the Physician will induce him to discard the disgusting pessary hitherto in use. It is gratifying to state, that it has met the decided approbation of every member of the Medical Faculty who has applied it, as well as every patient who has worn it.

The Subscribers having been appointed agents for the sale of the above instruments, all orders addressed to them will be promptly attended to. Price, $10.

Lowe & Reed, Boston; David Kimball, Portsmouth, N. H., Joshua Durgin, Portland, Me., Joseph Balch, Jr. Providence, R. I.; Elisha Edwards, Springfield, Mass.; N. S. Worden, Bridgeport, Conn. Oct. 5—6m

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